

EL PASO HEALTH

ROUTINE PREVENTIVE SERVICES FOR INFANTS AND CHILDREN (5 days - 24 MONTHS)											
The following guideline provides recommendations for routine preventive services for children birth to 24 months. Children at increased risk may warrant additional services.											
Recommendation	birth	5 days	2weeks	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo
History: Documentation must contain an initial health history and each subsequent checkup must contain information on an interim history.	x	x	x	x	x	x	x	x	x	x	x
Mental Health Screening: Mental health screening is required at each checkup and includes behavioral, social, and emotional development. http://brightfutures.aap.org/tool_and_resource_kit.html .	x	x	x	x	x	x	x	x	x	x	x
Postpartum Depression Screening for mothers (not dependent on her eligibility or coverage) using a validated tool: <ul style="list-style-type: none"> • Edinburgh Postnatal Depression Scale (EPDS) • Postpartum Depression Screening Scale (PPDS) • Patient Health Questionnaire 9 (PHQ-9) http://www.dshs.texas.gov/thsteps/forms.shtm	Recommended once during infant's THSteps medical checkup, up to the infants first birthday										
Tuberculosis Screening: TB Questionnaire must be administered annually beginning at 12 months of age. A Tuberculin Skin Test is to be administered when the screening tool indicates a risk for possible exposure								x			x
Developmental Surveillance/Screening: - Providers must use one of the following validated, standardized tools when performing developmental screening: <ul style="list-style-type: none"> • Ages and Stages Questionnaire (ASQ) • Ages and Stages Questionnaire: Social Emotional (ASQ:SE) • Parents' Evaluation of Developmental Status (PEDS) http://agesandstages.com/							x		x	x	
- Developmental surveillance is required at all other checkups and includes a review of milestones and mental health, including: gross and fine motor skills, communication skills, speech-language development, self-help/care skills and social, emotional, and cognitive development.	x	x	x	x	x	x		x	x		
Autism Screening: Providers must use Modified Checklist for Autism in Toddlers (M-CHAT or M-CHAT-R/F™)										x	x
Nutrition Screening : Dietary practices should be assessed to identify unusual eating habits such as pica, extended use of baby bottle feedings, or eating disorders in older children and adolescents. For nutritional problems, further assessment is indicated.	x	x	x	x	x	x	x	x	x	x	x
Age Appropriate Screening & Administration of Immunizations: Providers must assess the immunization status of clients at every medical checkup and vaccines must be administered according to the current Advisory Committee on Immunization Practices (ACIP). "Recommended Childhood and Adolescent Immunization Schedule. The ACIP schedule can be found at http://www.cdc.gov/vaccines/schedules/index.html .	x	x	x	x	x	x	x	x	x	x	x

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Newborn Screening: Second screening required at the two-week checkup, but no earlier than seven days after delivery.			x								
Blood Lead Level: For an elevated blood lead level of 5mcg/dL or greater, the provider must perform a confirmatory test using a venous specimen. The confirmatory specimen may be sent to the Department of State Health Services (DSHS) Laboratory, or the client or specimen may be sent to a laboratory of the providers choice.								x			x
Anemia: Required screening by hemoglobin or hematocrit levels								x			
Risk Based Test: Screenings performed based on risk assessments include screenings for dyslipidemia (dys). Document screening or reason why member was not screened.											dys
Complete Unclothed Physical Examination	x	x	x	x	x	x	x	x	x	x	x
Length/Height: Requires documentation of measurements and percentiles as appropriate	x	x	x	x	x	x	x	x	x	x	x
Weight: Requires documentation of measurements and percentiles as appropriate	x	x	x	x	x	x	x	x	x	x	x
BMI: Requires documentation of measurements and percentiles as appropriate											x
Fronto-Occipital Circumference: Requires documentation of measurements and percentiles as appropriate	x	x	x	x	x	x	x	x	x	x	x
Texas Health Steps recommends that health care providers:											
<ul style="list-style-type: none"> •Use the World Health Organization (WHO) growth charts http://www.cdc.gov/growthcharts/who_charts.htm for infants and children birth to 2 years of age. •Use the Centers for Disease Control and Prevention (CDC) growth charts http://www.cdc.gov/growthcharts/cdc_charts.htm for children who are 2 years of age or older. 											
Subjective Vision	x	x	x	x	x	x	x	x	x	x	x
Subjective Hearing	x	x	x	x	x	x	x	x	x	x	x
Age Appropriate Anticipatory Guidance & Health Education: Health education is designed to help parents and caregivers understand what to expect in terms of the child's development and to provide information for all ages about the benefits of healthy lifestyles and practices, as well as accident and disease prevention. Age-appropriate topics include, but are not limited to nutrition and crib safety (infants), reading and toilet training (toddlers). http://www.dshs.state.tx.us/thsteps/Anticipatory-Guidance.shtm	x	x	x	x	x	x	x	x	x	x	x
Dental: Limited oral screening for caries and general health of the teeth and oral mucosa is part of the physical examination. In addition to the federal requirements, Texas Health Steps policy requires referral to a dentist at six months of age and every six months thereafter until the dental home has been established.								x		x	x
Follow up Instructions to Return for Next Preventive Visit:	x	x	x	x	x	x	x	x	x	x	x
This guideline is based on the Texas Health Steps Periodicity Schedule and the Texas Health Steps Checkup Components. http://www.dshs.texas.gov/thsteps/providers.shtm											
Individual patient considerations and advances in medical science may supercede or modify these recommendations. Revised July 1, 2018											